



MED GROUP SCOOP

BEALE AFB, CALIFORNIA

9th Medical Group

Volume I, issue 2
July 2008

SUN SAFETY FOR YOUR CHILDREN

Provided by Roberta Trumm

Research has shown that two or more blistering sunburns as a child or teen increase the risk of developing skin cancer later in life. It is important, therefore, to protect babies and children from sunburn. Do this by making sun protection a regular family event. You can be the best teacher by practicing sun protection yourself and teach all members of your family how to protect their skin. Too many sunburns and too much sun exposure over the years can cause not only skin cancer, but also wrinkles and possibly cataracts of the eye. Babies under 6 months of age need extra protection from the sun. Babies have sensitive skin that is thinner than adult skin. This causes them to sunburn more easily than an adult. Even babies with naturally darker skin need protection.

Here are some specific rules for children younger than 1 year old:

- Babies younger than 6 months should be kept out of the direct sunlight. Move your baby to the shade or under a tree, umbrella or the stroller canopy.
- Dress your baby in clothing that covers the body, such as comfortable lightweight long pants, long-sleeved shirts, and hats with brims that shade the face and cover the ears.
- If your baby gets a sunburn and is younger than 1 year of age, contact your pediatrician at once - a severe sunburn is an emergency.
- If you cannot keep your child covered and in the shade, sunscreen can be applied. However, before covering your baby with sunscreen, be sure to apply a small amount to a limited area and watch for any reaction.

For children older than 1 year old and all family members, follow these simple rules to protect your family:

- Choose sunscreen that is made for children, preferably waterproof. Before covering your child completely, test the sunscreen on your child's back for a reaction. Apply carefully around the eyes, avoiding the eyelids. If a rash develops, talk to your pediatrician.
- Select clothes made of tightly woven fabrics. Clothes that have a tighter weave - the way a fabric is constructed - generally protect better than clothes with a broader weave. If you're not sure about how tight a fabric's weave is, hold the clothing up to a lamp or window and see how much light shines through. The less light, the better. Clothing made of cotton is both cool and protective.
- If your child gets a sunburn that results in blistering, pain or fever, contact your pediatrician.
- When using a cap with a bill, make sure the bill is facing forward to shield your child's face. Sunglasses with UV protection also are a good idea for protecting your child's eyes.

Here are some additional sun safety tips that apply to all members of your family:

- The sun's rays are the strongest between 10 a.m. and 4 p.m. Try to keep out of the sun during these hours.
- The sun's damaging UV rays can bounce back from sand, snow or concrete; so be particularly careful in these areas.
- Most of the sun's rays can come through the clouds on an overcast day; so use sun protection even on cloudy days.
- When choosing a sunscreen, look for the words "broad-spectrum" on the label - it means that the sunscreen will screen out both ultraviolet B (UVB) and ultraviolet A (UVA) rays.
- Choose a water-resistant or waterproof sunscreen. Sunscreens that are "waterproof" should be reapplied every two hours, especially if your child is playing in the water.
- Zinc oxide, a very effective sunblock, can be used as extra protection on the nose, cheeks, tops of the ears and on the shoulders.
- Use a Sun Protection Factor (SPF) of at least 15.
- Rub sunscreen in well, making sure to cover all exposed areas, especially your child's face, nose, ears, feet and hands, and even the backs of the knees.
- Put on sunscreen 30 minutes before going outdoors - it needs time to work into the skin.
- Keep your child completely out of the sun until the sunburn is totally healed.
- Sunscreens should be used for sun protection and not as a reason to stay in the sun longer.

Inside this issue:

Meet the Commander 2

Saying Goodbye to the Uniform 3

Upcoming Classes 4

Beale Pharmacy 4

Family Advocacy Classes 4

HAWC Classes 4

The Patient Advocate 4

The Central Appointments Office books appointments for the Family Practice, Pediatrics, Flight Medicine, Women's Health and Optometry clinics. Dialing (530) 634-2941 accesses them. The appointment telephone lines are available from 7 a.m. to 4 p.m. Mondays through Fridays.



www.tricareonline.com



Meet the New 9th Medical Group Commander



Colonel Dorothy Hogg earned a Bachelor of Science Degree in Nursing from the University of Southern Maine in 1981, a Masters of Science in Public Administration from Troy State University in 1994 and a Master of Science in nursing from Medical University of South Carolina in 1997. She is also a certified Women's Health Nurse Practitioner. She received her commission into the United States Air Force in 1983.

ASSIGNMENTS:

Jul 2008 - Present	9th Medical Group Commander, 9th Reconnaissance Wing, Beale AFB, CA
Jun 2007 - Jun 2008	79th Medical Operations Squadron Commander, 79th Medical Group, Andrews AFB, MD
May 2006 - Jun 2007	Executive Development Intern, Manpower and Organization/SDE equivalent/HQ AF/SG Bolling AFB, DC
Jul 2004 - May 2006	22d Medical Operations Squadron Commander/Chief Nurse Executive/22d Medical Group; McConnell AFB, KS
May 2002 - Jul 2004	Clinical Medicine Flight Commander, 314th Medical Group, Little Rock AFB, AR
Feb 2001 - May 2002	Family Practice Flight Commander, 314th Medical Group, Little Rock AFB, AR
Jul 1997 - Feb 2001	Maternal-Infant Flight Commander, 366th Medical Group, Mountain Home AFB, ID
Aug 1996 - Jul 1997	AFIT Master's Student, Medical University of South Carolina, Charleston, SC
Dec 1992 - Aug 1996	Women's Health Nurse Practitioner, 18th Medical Group, Kadena AB, Japan
Sept 1989 - Dec 1992	Women's Health Nurse Practitioner, 52d Medical Group, Spangdahlem AB, Germany
Mar 1987 - Sept 1989	Women's Health Nurse Practitioner, 410th Medical Group, K.I. Sawyer AFB, MI
Aug 1986 - Mar 1987	Nurse Practitioner Student/School of Healthcare Sciences/Sheppard AFB, TX
Feb 1984 - Aug 1986	Staff Nurse, OB/GYN Nursing Unit/USAF Regional Hospital/Eglin AFB, FL
April 1983 - Feb 1984	Registered Nurse, Postpartum Unit/Humana Hospital/Fort Walton Beach, FL
Jun 1977 - April 1983	Certified Nursing Assistance/Registered Nurse/Portsmouth Hospital, Portsmouth, NH

CURRENT NATIONAL CERTIFICATION:

Women's Health Nurse Practitioner National Certification Corporation/30 Jun 2007

MAJOR AWARDS AND DECORATIONS:

AF Meritorious Service Medal, 5 oak leaf clusters

AF Commendation Medal, 2 oak leaf clusters

Message from the 9th Medical Group Commander Colonel Dorothy A. Hogg

My name is Col Dot Hogg and I am the new Medical Group (MDG) Commander. My last assignment was as Commander of the 79th Medical Operations Squadron at Andrew AFB in Maryland. I assumed command of Beale's Medical Treatment Center on 3 July 2008. I appreciate having this opportunity to tell you a little about myself and share my vision for the 9 MDG.

I am a Women's Health Nurse Practitioner and have been at many exciting assignments, but none in California until now. My dedication to the medical field has been lifelong starting as a certified nursing assistant at Portsmouth Hospital, Portsmouth, New Hampshire. I am married with two daughters, Jessica and Tori, and a proud Grandmother of two, Aidan, 7 and Julianna, 20 months. My husband, Jeff and I are thrilled to be on the West coast and hope to take in as much of the sights and culture of the West as possible.

I appreciate the honor provided to be the commander of a medical treatment facility with such a rich tradition and history. It is amazing that so many of our personnel were here at Beale as young children and have returned to serve this Wing. It is my hope that the Medical Group will continue to be a legacy to the active duty members, their children and our retired community. The medics at the Beale Clinic are proud to have the opportunity to serve our patients and we look forward to a future filled with continued opportunities to exceed your expectation.

My vision for the Beale Clinic is to be a military treatment facility of choice; providing comprehensive primary healthcare. In order to do this, I am asking your assistance in helping us to identify areas that we might be less than perfect in. By doing this, we can resolve problems and improve the care we provide to you and your family. I am excited to have the opportunity to lead the 9th Medical Group into the future ... COMBAT MEDICS, ANYTIME, ANYWHERE!



When It's Time to Say Goodbye to the Uniform, Transitional Medical Benefits Can Help Bridge the Gap

Each year thousands of service members separate from the Service before they are eligible for retirement. Making the transition from military to civilian can be a challenge, but there is support to help Service members and their families meet their health care needs.

"As our warriors transition from the sacrifices of serving their nation, we don't want them to have to worry about having health coverage," said Army Maj. Gen. Elder Granger, Deputy Director, TRICARE Management Activity. "These programs are here to help bridge the gap between military health benefits and a civilian health plan."

The Transitional Assistance Management Program (TAMP) provides 180 days of transitional health care benefits to certain Uniformed Service members and their families, if the Service member is:

- Involuntarily separating from Active Duty (AD) under honorable conditions.
- A National Guard or Reserve member separating from AD after a period of more than 30 consecutive days in support of a contingency operation.
- Separating from AD following involuntary retention (stop-loss) in support of a contingency operation.
- Separating from AD following a voluntary agreement to stay on AD for less than one year in support of a contingency operation.

For those who qualify, the 180-day TAMP period begins upon the AD sponsor's separation. Separating AD Service Members and deactivating National Guard or Reserve members who are eligible for the TAMP must reside in a TRICARE Prime Service Area or in an overseas area in which TRICARE Prime Overseas is offered in order to use these Prime programs during the 180-day TAMP period. Beneficiaries eligible for Prime or Prime Overseas during TAMP must enroll or reenroll (if enrolled in a Prime program during the AD period) at the beginning of the TAMP period. Those eligible for TAMP who do not reside in a Prime area can use TRICARE Standard and Extra or TRICARE Standard Overseas.

For separating AD Service Members and deactivating National Guard and Reserve members, TRICARE Prime coverage during TAMP will be slightly different than it was during the AD service period. During TAMP, beneficiaries are covered as an AD family member and all rules for that beneficiary category apply, including any applicable deductibles, cost shares and co-payments.

For more information on TAMP, visit www.tricare.mil/mybenefit/home/overview/SpecialPrograms/TAMP or contact the regional contractor.

National Guard and Reserve members may qualify for and purchase TRICARE Reserve Select (TRS). TRS is a voluntary, premium-based health care plan that is only available when you are a member of the Select Reserve and are not eligible for any other non-premium-based TRICARE health coverage (like when serving on AD or if covered under the TAMP), or eligible for the Federal Employee Health Benefit Program. To learn more about TRS, visit www.tricare.mil/mybenefit/home/overview/Plans/ReserveSelect.

Individuals who lose TRICARE eligibility or other coverage under the Military Health System are eligible for temporary health care coverage through the Continued Health Care Benefit Program (CHCBP). CHCBP is not part of TRICARE, but provides similar benefits and operates under most of the rules of TRICARE Standard.

CHCBP is a premium-based health care program administered by Humana Military Healthcare Services, Inc. CHCBP offers temporary transitional health coverage (18-36 months) after TRICARE eligibility ends. Beneficiaries who qualify can purchase CHCBP within 60 days of loss of eligibility for either regular TRICARE or TAMP coverage.

Who is eligible? Under certain circumstances, the following beneficiaries may be eligible:

- Former AD Service Members released from AD (under other than adverse conditions) and their eligible family members. Coverage is limited to 18 months.
- Un-remarried former spouses who were eligible for TRICARE on the day before the date of the final decree of divorce, dissolution, or annulment. Coverage is usually limited to 36 months. However, some un-remarried former spouses may continue coverage beyond 36 months if they meet certain criteria. Contact Humana Military for details.
- Children who cease to meet the requirements to be an eligible family member and were eligible for TRICARE on the day before ceasing to meet those requirements. Coverage is limited to 36 months.
- Certain unmarried children by adoption or legal custody. Coverage is limited to 36 months.

For more information about CHCBP, visit www.humana.military.com/chcbp/main.htm or call 1-800-444-5445. Contact the regional contractor or a Beneficiary Counseling and Assistance Coordinator to discuss eligibility for this program.



9th Medical Group

Upcoming Classes

- OB Orientation 3rd Wednesday of each month 9-12 am held in the Clinic Conference Room at the Clinic.
- Breastfeeding 2nd Tuesday of each month 4-6 pm held at Family Advocacy.
- Survive and Thrive 2nd Tuesday of each month 9-11 am held at the Omni.
- Anger Awareness: meets every Wednesday, 1-3 pm. Call Family Advocacy at 634-3423 to register or if you have any questions.



BASE STICKERS

REQUIRED AT TRAVIS AFB

As of April 1, 2008 you must have a base sticker on your vehicle to enter Travis AFB. If not, you must go to the visitor center and get a pass.

The Beale Pharmacy



The pharmacy at Beale AFB strives for the best customer service and patient care, reflected by its shorter waiting times compared to most high-volume pharmacies (at peak times: 60 minutes at Beale and 4 hours off-base). However, there are times when our waiting times may be longer and thus not fast enough to meet demands. For this reason, there are two additional options that our customers can use conveniently to obtain their medications – the Automated Pharmacy Machine (APM) located at the BX, or Tricare Mail Order Pharmacy (TMOP).

The APM only dispenses refill prescriptions and requires a personal identification number (PIN), which can easily be obtained at the pharmacy pick-up window. The following can not be dispensed out of the APM: new prescriptions (handwritten and Physician Order Entry), controlled substances or narcotics (e.g. Tylenol with codeine, Vicodin), large bottles and boxes (e.g. a refill prescription requiring a bottle size similar or bigger than a small bottle of Gatorade or a small box of chicken noodle soup), medications requiring mixing and/or refrigeration (e.g. Amoxicillin suspension, insulin).

With fuel prices increasing daily, the TMOP program may be the best option to obtain your medications. It permits an easier and more convenient way to get the medications you take regularly delivered directly to your home for a low co-payment for a 90-day supply. More information about the TMOP program can be obtained at the pharmacy or on the internet at <http://www.tricare.mil/Pharmacy>.

The pharmacy is staffed by two pharmacists, five military technicians, three civilian technicians and volunteers. On average the pharmacy dispenses 8,500 prescriptions per month or about 425 prescriptions per day. Our annual budget is \$4.6 million which rounds out to about \$20,000 per business day. Pharmacy hours are Monday through Friday from 7:30am to 5:00pm, and closed on all federal holidays and designated "down" days. In addition, we are open at 10:00am on the first Wednesday of each month for training. The pharmacy phone number is (530) 634-2337; the number for refills is (530) 634-2859.

JULY HAWC CLASSES

Cardio Walking Class– 40 minute walking-class starting at the Omni: July 17, 24 & 31st 8-9 am

DASH-Dietary Approach to Stop Hypertension, diet to assist in lowering high blood pressure: July 18 & 24 9 am-10:30 am

Cholesterol Class - To assist in the lowering of high cholesterol, triglycerides, LDL and raise HDL : July 17 9 am– 10:30 am or July 28 1 pm-2:30 pm

Weight Training for Beginners - Basic rules for weight training, using free weights and weight machines: July 29 10 am-11 am

Eating on the Run Class - Geared towards anyone with a busy lifestyle that doesn't always have time to eat or cook at home: July 18 1 pm-2 pm

Weight Loss Class - 4 session class to assist with losing weight in a healthy way. Basic nutrition, exercise, menu plans: July 21 5:30 pm-6:30 pm

Nutrition 101– Basic nutrition education: July 23 & 31st 1 pm-2 pm

The Patient Advocate

The patient advocate receives complaints regarding medical services over the phone, in person, through a spouse or friend or anonymously through customer comment cards. Once the complaint is received, it is usually handled and resolved in the same day. The following is a list of the patient advocates role.

- **Fosters good community relations**
- **Ensures customer satisfaction and quality service**
- **Seeks ways to improve patient relations and sensitivity**
- **Keeps patients informed**
- **Ensures effective communication with patients**
- **Provides opportunities for patients to comment and suggest quality improvement**
- **Ensures customer satisfaction and quality service**
- **Greets patients properly**
- **Invites comments on how well we provided care or services**
- **Seeks ways to improve patient relations and sensitivity**
- **Actively involved in ensuring patient rights are met**
- **Ensures effective communication with patients**

The 9th Medical Group patient advocate is Mr. Rick Browning. If you have a complaint or comment regarding Medical services, please feel free to contact Mr. Browning at 530-634-4848.